



Carole Chen, Warden
Fraser Valley Institution for Women
33344 King Rd, Abbotsford, BC V2S 6J5

Re: February 2025 Advocacy Visit Follow-Up

March 17th, 2025

Dear Carole,

We want to thank the Institutional Management Team (IMT) at Fraser Valley Institution (FVI) for taking the time to meet with our Pacific Regional Advocacy Team on March 4th, 2025, via Teams. This letter details the overarching issues at FVI that were reported to The Canadian Association of Elizabeth Fry Societies (CAEFS) during our advocacy visit on February 20th and 21st, 2025. It also includes our summary of the discussion that took place during the meeting mentioned above, relevant laws and policies, and CAEFS' recommendations.

1. Timely Access to Programming

Description: Advocates met with an individual in the medium security population at FVI who reported waiting one year to access a high intensity program required in their correctional plan. This individual was told by their institutional parole officer that they cannot apply for day parole or access private family visits at the penitentiary until this program is completed. Numerous requests were made to the institutional parole officer to access this mandatory programming at an earlier date to mitigate potential negative impacts on conditional release, but this person reported that their advocacy attempts were unsuccessful, and their institutional parole officer told them they must remain incarcerated past their May 2025 day parole eligibility dates.

This individual has three young children in the Lower Mainland and communicated to advocates the importance of returning to community at their earliest opportunity to resume their role as single parent in community.

Discussion: IMT said they were familiar with this individual's circumstances and recommend the Lead Advocate connect with FVI's Assistant Warden of Interventions and the Manager of Programs to discuss what can be done to support this individual returning to community at the earliest possible opportunity.

Law/Policy:

Corrections and Conditional Release Act (CCRA), section 3(b): The purpose of the federal correctional system is to contribute to the maintenance of a just, peaceful and safe society by assisting the rehabilitation of [people who

are incarcerated] and their reintegration into the community as law-abiding citizens through the provision of programs in penitentiaries and in the community.

CCRA, section 4(c.2): The Service ensures the effective delivery of programs to [incarcerated persons], including correctional, educational, vocational training and volunteer programs, with a view to improving access to alternatives to custody in a penitentiary and to promoting rehabilitation.

CCRA, section 4(g): Correctional policies, programs and practices respect gender, ethnic, cultural, religious and linguistic differences, sexual orientation and gender identity and expression, and are responsive to the special needs of women, Indigenous persons, visible minorities, persons requiring mental health care and other groups.

CCRA, section 76: The Service shall provide a range of programs designed to address the needs of [incarcerated persons] and contribute to their successful reintegration into the community.

CAEFS Recommendations: Conditional release provides individuals with the strongest opportunities to be successful in their reintegration. According to the Parole Board of Canada, the gradual release of individuals from incarceration, also known as the continuum of release, is the best way to reintegrate people who are incarcerated into community. CAEFS appreciates IMT's willingness to engage in dialogue with CAEFS, to work towards the shared goal of reintegration to community at the earliest possible date.

2. Conditions in the Maximum-Security Unit

Description: Advocates continue to receive reports on the conditions of the maximum-security unit at FVI. Issues include:

The maximum-security unit's printer, the primary printer accessible to the maximum-security population, is broken and as a result has created a barrier to printing necessary materials for people.

Individuals reported several financial barriers unique to people who are classified as maximum-security at FVI. Compared to lower security classifications, people who are maximum-security at FVI are required to purchase more expensive canteen items, such as bottles instead of cans, due to institutional safety concerns and protocol.

People also expressed limited employment opportunities available to the maximum-security population, and that they feel those who are classified as maximum security and have sub-security levels one or two have even fewer employment options, as their security classification prohibits them from leaving the unit.

Advocates were told that people in maximum-security generally receive full-time pay by combining payment from work and programming. It was reported to advocates that people in the maximum security currently have access to one program, the Dialectical Behaviour Therapy (DBT) Program, which is only available one day per week. As a result, people are receiving one day per week of full pay due to limited access to programming.

Individuals also communicated the need for increased mental health supports in the maximum-security unit. Access to leisure activities that support with mental health such as volleyball and the library remain inconsistent. Advocates were told that the event for Valentine's Day was well received by the population in maximum-security, and that more group activities would support both mental health and wellness as well as community building.

Lastly, individuals shared that they are hesitant to engage with the maximum-security unit's inter-disciplinary team (IDT) due to its composition. Individuals reported feeling isolated and as though their concerns are not being addressed or



escalated to the institutional management level, in part because of the overlap between IDT and maximum-security staff. People in maximum security said that IDT decisions, such as decisions to deny structured activity proposals, feel based on security concerns and operational capacity, and there is limited space for dialogue and creative problem-solving or collaboration.

Discussion: IMT confirmed that the printer in the maximum-security unit has been fixed. They also confirmed that certain canteen items cannot be purchased by people in maximum-security due to security risk, but that new items will be added to the canteen to provide people in maximum-security with additional purchase options. IMT shared that the Inmate Wellness Committee (IWC) recently purchased and donated containers to the maximum-security population to reduce the number of items on canteen inaccessible to people in maximum security due to packaging and the corresponding perceived institutional security risk.

IMT said the IDT must be both balanced and capable of moving cases forward, but that they are open to a composition review. IMT said they will also review the proposals submitted to the IDT from the maximum-security population. Advocates were told that individuals receive full-time pay for DBT as daily homework and assignments supplement the program, but that there were recent issues with paysheet submissions for the maximum-security unit and perhaps this corresponds to the reported concern.

IMT stated they will review the number of times people in maximum-security had access to the library as well as Elder supports as these occurrences should be documented by maximum-security staff.

Law/Policy:

CCRA, section 3(b): The purpose of the federal correctional system is to contribute to the maintenance of a just, peaceful and safe society by assisting the rehabilitation of people who are incarcerated and their reintegration into the community as law-abiding citizens through the provision of programs in penitentiaries and in the community.

CCRA, section 4(c): the Service uses the least restrictive measures consistent with the protection of society, staff members and people who are incarcerated.

CCRA, section 4(c.2): the Service ensures the effective delivery of programs to people who are incarcerated, including correctional, educational, vocational training and volunteer programs, with a view to improving access to alternatives to custody in a penitentiary and to promoting rehabilitation.

CAEFS Recommendations: CAEFS encourages CSC to focus on the Creating Choices philosophies of empowerment, support, and person-centered care in its administration of the material conditions of incarceration to people of all security classifications. CAEFS has long called for the closure of the maximum-security unit. With many population management options available to the CSC, an assessment of the maximum-security units would be timely and would address the scope of issues reported to CAEFS monthly from these units.

3. Barriers to Peer Led Associations and Committees

Description: Individuals continue to report on the challenges to establishing and maintaining population-run committees at FVI.



Advocates were told that a proposal to establish an Ethnocultural Committee was submitted by the FVI population in early December 2024, but by late February 2025, the proposal has yet to be approved and there have been no updates from IMT. Individuals reported wanting to host events within the penitentiary to celebrate Ramadan, but that this is no longer possible given the timeline needed for institutional approval of the committee.

Chairs of the established committees continue to report on the challenges to filling committee positions. A potential solution identified by committees at FVI is the establishment of peer mentorship opportunities for people who are new to committee work and would benefit from additional support by those transitioning out of their elected positions.

CAEFS advocates are also working with peer advocates on a structured activity proposal for a workshop designed to increase knowledge and understanding of committees as legislated mechanisms for population representation.

Discussion: The Manager of Programs stated that the employment positions of Chair and Co-Chair of the Ethnocultural Committee were made available to the population last week. IMT said they are hoping to fill these positions as quickly as possible.

Law/Policy:

CCRA, section 74: The Service shall provide [people in prison] with the opportunity to contribute to decisions of the Service affecting the population [of incarcerated people] as a whole, or affecting a group within the [incarcerated] population, except decisions relating to security matters.

Commissioner's Directive (CD) 767 (Ethnocultural [People in Prison]), section 9: The Institutional Head will: (b) foster an environment where ethnocultural activities, services and interventions can take place; (c) allow [incarcerated persons] to form ethnocultural associations or committees that will meet their cultural needs and interests.

CD 083 (Inmate Committees), Purpose: To establish a forum for inmate engagement and input regarding institutional operations and policies.

CAEFS Recommendations: Peer led committees are an essential element of the Creating Choices model of incarceration and are legislated through various principles within the Corrections and Conditional Release Act. Functional committees provide individuals with the opportunity to build community, positively contribute to the penitentiary environment, and to develop transferable vocational skills that will aid in community re-entry. CAEFS continues to offer our support and resources to assist in strengthening committees and supporting effective communication between committees and institutional management toward the resolution of systemic issues.

4. Access to Healthcare

Description: Several people reported challenges to accessing essential healthcare at FVI.

Individuals reported going directly to healthcare to request urgent care such as emergency access to FVI's physician or hospitalization, but that these urgent care requests were denied by healthcare staff and individuals were being told to return to their living units with Tylenol.

People in medium security reported feeling like they must bring a correctional officer to healthcare to attest to healthcare staff that their pain or illness is serious and urgent care is needed.



It was also reported to advocates that gender-diverse people at FVI are struggling to receive prescriptions from the dietician for increased calorie intake diets. The dietician at FVI is reportedly saying they cannot prescribe an increased calorie diet to people on testosterone or pre-operative transwomen because of institutional constraints. Advocates were told that people are feeling unwell and experiencing negative health impacts caused by insufficient calorie and protein intake.

Discussion: IMT said they had not heard about the dietary issue, but that people at FVI who identify a need will be supported. IMT also said incarcerated people have a lot of control over their calorie intake with grocery orders. IMT confirmed that the dietician can prescribe additional food that will not be deducted from a person's canteen funds.

IMT stated that if people are not receiving adequate healthcare at FVI, they can use the CSC grievance procedure as well as external avenues for redress specific to healthcare providers, including dieticians.

Law/Policy:

CCRA, section 86(1): The Service shall provide every [incarcerated person] with (a) essential health care; and (b) reasonable access to non-essential health care.

CCRA, section 87: The Service shall take into consideration an [incarcerated person's] state of health and health care needs in all decisions affecting the [incarcerated person's], including decisions relating to placement, transfer, confinement in a structured intervention unit and disciplinary matters.

CCRA, section 86(1): When healthcare is provided to [people who are incarcerated], the Service shall: (a) support the professional autonomy and the clinical independence of registered health care professionals and their freedom to exercise, without undue influence, their professional judgment in the care and treatment of [incarcerated persons]; (b) support those registered health care professionals in their promotion, in accordance with their respective professional code of ethics, of patient-centered care and patient advocacy; and (c) promote decision-making that is based on the appropriate medical care, dental care and mental health care criteria.

CD 800 (Health Services), section 2(a): the provision of health services to [incarcerated people] in CSC institutions and in the community, in accordance with relevant legislation, professionally accepted standards, CSC policies and practice directives.

CAEFS Recommendations: It is the CSC's responsibility to provide federally sentenced people in Canada with access to essential healthcare. As incarcerated people are reliant on both penitentiary staff and health contractors to provide health services, referrals, emergency care, timeframes, etc., it is incumbent on the CSC to center the dignity and care of these individuals. CAEFS encourages FVI to prioritize clear communications to people at FVI regarding the protocol for requesting and accessing emergency healthcare, and to respond to emergency healthcare requests with urgency.

5. Access to Elder Support

Description: People from all security classifications reported limited access to Elder support at FVI.

It was reported to CAEFS that individuals in medium security were told to expect a 6-month gap in Elder support services.

Individuals in maximum-security told advocates that a new Elder has been hired for the unit, but reported that Elder support or programming hasn't been offered yet in a meaningful way, in spite of the majority of people incarcerated in maximum-security identifying as Indigenous.

Discussion: IMT acknowledged there has been a transition in Elder services at FVI, but that they are doing their best to ensure access remains consistent. The primary Elder for the medium security population is away on leave, but they have requested additional support from FVI's Two-Spirit Elder in the interim.

Law/Policy:

CCRA, section 4(g): All correctional policies, programs and practices respect gender, ethnic, cultural, religious and linguistic differences, sexual orientation and gender identity and expression, and are responsive to the special needs of women, Indigenous persons, visible minorities, persons requiring mental health care and other groups.

CCRA, section 83(1): Indigenous spirituality and Indigenous spiritual leaders and elders have the same status as other religions and other religious leaders.

CCRA, section 83(2): The Service shall take all reasonable steps to make available to Indigenous [people] the services of an Indigenous spiritual leader or elder after consultation with (a) the national Indigenous advisory committee established under section 82; and (b) the appropriate regional and local Indigenous advisory committees.

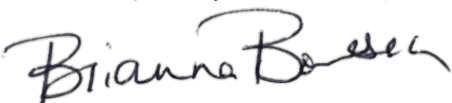
CD 700 (Correctional Interventions): The Institutional Head will ensure correctional policies, assessments, respect, programs and practices and are responsive to:

1. gender, including the special needs of women
2. ethnic, cultural and linguistic differences, including Indigenous [people who are incarcerated]
3. [incarcerated persons] requiring mental health care and those with physical disabilities

CAEFS Recommendations: Over 50% of people incarcerated in federal prisons designated for women are Indigenous, and meeting the needs of Indigenous people in custody must be a priority. It is CAEFS view that CSC should, in the spirit of addressing this national human rights crisis and upholding the principles of Creating Choices, prioritize the decarceration of Indigenous people in Canada, especially women and gender diverse people.

Thank you for taking the time to review this letter and for your continued efforts to improve the outcomes for individuals in your custody and care. CAEFS appreciates IMT's willingness to engage in dialogue with the people incarcerated at FVI to ensure the voices of those impacted are included in institutional decisions. CAEFS encourages FVI to continue collaborating with the committees at FVI to improve the conditions of confinement and create a penitentiary environment that is aligned with law and policy, and the Principles of Creating Choices.

Respectfully,



Brianna Bourassa
Lead Advocate, Pacific Regional Advocacy Team, CAEFS